



EW 2642

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on

4-4-05

Jeffrey R. Kuester

In Re Application of:

Holt, et al.

Serial No.: 08/876,839

Filed: June 16, 1997

Confirmation No.: 5436

Group Art Unit: 2642

Examiner: Tieu, Benny Quoc

Docket No.: 190251-1270

For: **Method and Apparatus for Routing Calls Based on Identification of the Calling Party or Calling Line**

The following is a list of documents enclosed:

- Return Postcard
- Petition for Extension of Time
- Amendment Transmittal Page
- Fee Transmittal
- Credit Card Authorization
- Amendment and Response to Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Customer No.: 38823

**AMENDMENT TRANSMITTAL LETTER (LARGE)**Applicant(s): **Holt, et al.**

Docket No.

190251-1270Serial No.
08/876,839Filing Date
June 16, 1997Examiner
TieuConfirmation No.
5436Group Art Unit
2642Invention: **Method and Apparatus for Routing Calls Based on Identification of the Calling Party or Calling Line****Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450**

Transmitted herewith is Amendment and Response to Office Action, and a one-month Petition for Extension of Time in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	28 -	28 =	0	X \$50.00	\$0
INDEP. CLAIMS	9 -	9 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input checked="" type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$120
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$120.00

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☒ A Credit Card Payment Form PTO-2038 is attached in the amount of \$120.00 (for 1 mo. EOT).
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.



Jeffrey R. Kuester, Reg. No. 34,367

Date